

COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

RECEIVED

OCT 11 2016

PUBLIC SERVICE  
COMMISSION

In the Matter of:

AIRVIEW UTILITIES, LLC'S NOTICE OF  
SURRENDER AND ABANDONMENT OF  
UTILITY PROPERTY

CASE NO. 2016-00207

**AIRVIEW UTILITIES, LLC'S SUPPLEMENTAL ANSWERS TO  
ATTORNEY GENERAL'S SECOND REQUEST FOR INFORMATION**

Comes Airview Utilities, LLC ("Airview"), by counsel, and for its Supplemental  
Answers to the Attorney General's Second Request for Information, states as follows:

**INFORMATION REQUEST NO. 3:** Reference Airview's response to AG 1-2(a) to  
answer the following questions:

- a. Explain in full detail why Hardin County Water District No. 2 refused to provide billing/collection services for Airview.

**ANSWER:** Airview does not know the reasons why Hardin County Water District No. 2 refused to provide the requested billing/collection services for Airview.

- b. Airview states that, "[p]ackage treatment plants were designed to be a temporary remedy to provide wastewater treatment services to its customers until service could be provided on a permanent WWTP."
  - i. Provide documentation supporting this assertion.

**ANSWER:** See page 2 of the minutes of the August 24, 2016 meeting of the Interim Joint Committee on Local Government. (Attachment A.) **See also the Answers of Airview Utilities, LLC to Public Service Commission's Data Requests, Answer No. 1.**

**INFORMATION REQUEST NO. 4:** Reference Airview's response to AG 1-2(b), Attachment A, to answer the following questions:

- b. Provide a detailed explanation of the Bad Debt Expense category, the cost components included, and why there are large variances in expense amounts between 2013 and 2015.

**ANSWER:** The Bad Debt Expenses reflect the amount of customer delinquencies that have been written off because they are uncollectable. **Prior to 2013 no delinquent payments were written off. This resulted in a large number of write-offs in 2013, as recommended by Pat Logsdon of the accounting firm of Strothman and Company.** Airview relies upon its accountant, Pat Logsdon of Strothman and Company to determine the amount of bad debts to be written off.

- k. Provide a detailed explanation of the Plant Operator category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2016.

**ANSWER:** The Plant Operator category reflects the payments made to the individual that operates the WWTP. Variances in the amounts paid are due to financial condition of Airview. The Plant Operator has been Shawn Ford for the relevant time period, **with assistance from Andrew McMonigal. Mr. Ford is paid the amount of \$1,000 per month.**

- n. Provide a detailed explanation of the Office category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2016.

**ANSWER:** The Office category consists of postage, payment for new checks, office supplies and contract labor for bookkeeping services when needed. Variances in the expense amounts result from variances in the use of these items and demand and need for bookkeeping contract services.

- o. Provide a detailed explanation of the Bank and Merchant Charges category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2016.

**ANSWER: The cost of taking payments over the telephone is included in the Bank and Merchant Charges category. Airview is now taking payments over the telephone, and this has resulted in an increase in the expenses in this category. Airview began accepting credit payments through PNC Merchant Services in September of 2015, and incurred set up fees at that time.**

- r. Provide a detailed explanation of the Supervision category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2015.

**ANSWER: Supervision charges are incurred when work that is over and above the normal and customary work for a WWTP is undertaken. Payments have been made to Larry Smither under this category for such work. The variance results from the infrequent nature of this work.**

- t. Provide a detailed explanation of the Insurance category, the cost components included, and to what entity/person the payments were made.

**ANSWER: Airview has obtained liability insurance on the Airview WWTP from Westfield Insurance Company.**

- u. Provide a detailed explanation of the Miscellaneous: Storage, Damage Claim category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2016.

**ANSWER:** This category reflects the amounts paid in responding to a customer claim of damage with respect to the real property at 46 West Airview, and also the cost of a storage unit. The storage is provided by Weestorit.

- v. Provide a detailed explanation of the Tax category, the cost components included, to what entity/person the payments were made, and why there are large variances in expense amounts between the years 2012 through 2016.

**ANSWER:** The Tax category reflects the payment of state and local property tax, the annual fee paid to the Office of the Secretary of State, the assessment paid to the Public Service Commission, and the cost to obtain an extension of time to file taxes. The variance results from the payment of taxes when the funds are available.

- w. Provide a detailed explanation of the Loans category, the cost components included, what entity/person provided the loan to Airview, copy of all loan documents, reason for the loans, and whether or not each loan complied with KRS 278.300 which requires Commission approval of utility indebtedness, with minor exceptions.

**ANSWER:** See Answer to Information Request Nos. 5(a), and 5( e). **Additionally, in 2015, Airview paid the amount of \$800.00 to Coolbrook Utilities in payment of a loan. In 2016, Airview paid the amount of \$200.00 to Fox Run Utilities in payment of a loan. The amount of \$513.00 was paid to Covered Bridge, and this amount should have been reflected as payment on account, rather than payment on a loan.**

**INFORMATION REQUEST NO. 5:** Reference Airview's response to AG 1-2(d), Attachment B, that provides all of Airview's creditors and outstanding debts to answer the following questions:

- a. Brocklyn Utilities, currently owed \$4,950:

- i. Provide a copy of any and all note/loan agreements between Airview and Brocklyn Utilities.

**ANSWER:** There are no written loan agreements between Airview and Brocklyn Utilities. **These were short term no-interest loans that were made to Airview to enable it to meet its immediate obligations and that were necessary due to the cash flow problems caused by customer delinquencies.**

- ii. Provide the name of the owner(s) of Brocklyn Utilities.

**ANSWER:** Lawrence W. Smither and Martin G. Cogan are the members of Brocklyn Utilities.

- iii. Provide a full explanation as to whether a conflict of interest exists between Brocklyn Utilities and Airview.

**ANSWER:** Objection. Airview objects to this request as it is ambiguous and requires speculation as to its meaning. Furthermore, it requests information that is irrelevant to this proceeding and is not likely to result in the discovery of relevant evidence. Without waiving this objection, Airview states that it does not believe that a conflict of interest exists.

- iv. Did Airview request the Commission's permission before entering into loan agreement(s) with Brocklyn Utilities? If so, provide the case number(s). If not, explain how the loan did not violate KRS 278.300 which requires Commission approval of utility indebtedness with minor exceptions.

**ANSWER:** No, permission was not required pursuant to KRS 278.300(8). **These were short term no-interest loans that were made to Airview to enable it to meet its immediate obligations and that were necessary due to the cash flow problems caused by customer delinquencies. Since the loans were for a proper purpose, and were intended to**

**be repaid within two years originally, or as extended, they are excepted from the requirements of KRS 278.300(1).**

- c. Shawn Ford, currently owed \$12,950.00:
  - i. Provide a copy of any and all invoices from Shawn Ford to Airview Utilities regarding the outstanding debt.

**ANSWER:** Shawn Ford is paid **the amount of \$1,000** by Airview on a monthly basis to operate the Airview WWTP, **and receives no additional payments for this work.** Mr. Ford is not required to submit an invoice to Airview, as his monthly pay is a fixed amount.

- ii. Provide the name of the company that Shawn Ford is employed by, as well as the name of the owner(s) of this company.

**ANSWER:** Mr. Ford is self-employed when conducting work for Airview **as the operator of the WWTP, and receives no additional payments for this work. Mr. Ford is also employed by Covered Bridge Utilities. If Shawn Ford performs work at the Airview WWTP for Covered Bridge Utilities, he would be paid for this work by Covered Bridge Utilities.**

- iii. Provide a full explanation as to whether a conflict of interest exists between Shawn Ford and/or his employer and Airview.

**ANSWER:** Objection. Airview objects to this request as it is ambiguous and requires speculation as to its meaning. Furthermore, it requests information that is irrelevant to this proceeding and is not likely to result in the discovery of relevant evidence. Without waiving this objection, Airview states that it does not believe that a conflict of interest exists.

- iv. Did Airview issue a request for proposal (RFP) for any of the work performed by Shawn Ford? Provide a copy of all bids Airview received by Shawn Ford, and indicate whether or not it was the lowest cost bid. If Airview did not request bids, explain in full detail why not.

**ANSWER:** No.

b. Hazelrigg & Cox, LLP, currently owed \$3,485.28:

- i. Provide a copy of any and all invoices submitted by Hazelrigg & Cox to Airview Utilities regarding the outstanding debt.

**ANSWER:** See Attachment C.

- ii. Provide a detailed explanation of what work was performed in conjunction to the outstanding debt.

**ANSWER:** See Attachment C.

c. Coolbrook Utilities, currently owed \$4,115.00:

- i. Provide a copy of any and all note/loan agreements between Airview and Coolbrook Utilities.

**ANSWER:** There are no written loan agreements between Airview and Coolbrook Utilities. **These were short term no-interest loans that were made to Airview to enable it to meet its immediate obligations and that were necessary due to the cash flow problems caused by customer delinquencies.**

- ii. Provide the name of the owner(s) of Coolbrook Utilities.

**ANSWER:** The members of Coolbrook Utilities are Lawrence W. Smither and Martin G. Cogan.

- iii. Provide a full explanation as to whether a conflict of interest exists between Coolbrook Utilities and Airview.

**ANSWER:** Objection. Airview objects to this request as it is ambiguous and requires speculation as to its meaning. Furthermore, it requests information that is irrelevant to this proceeding and is not likely to result in the discovery of relevant evidence. Without waiving this objection, Airview states that it does not believe that a conflict of interest exists.

- iv. Did Airview request the Commission's permission before entering into loan agreement(s) with Coolbrook Utilities? If so, provide the case number(s). If not, explain how the loan did not violate KRS 278.300 which requires Commission approval of utility indebtedness with minor exceptions.

**ANSWER:** No, permission was not required pursuant to KRS 278.300(8). **These were short term no-interest loans that were made to Airview to enable it to meet its immediate obligations and that were necessary due to the cash flow problems caused by customer delinquencies. Since the loans were for a proper purpose, and were intended to be repaid within two years originally, or as extended, they are excepted from the requirements of KRS 278.300(1).**

**INFORMATION REQUEST NO. 9:** Reference Airview's response to AG 1-3(b). Provide the dates during which Airview utilized Credit Solutions, LLC as a collection agency, and any documentation that demonstrates the inability of Credit Solutions to collect on delinquent accounts.

**ANSWER:** Airview began using the services of Credit Solutions, LLC in the latter part of 2011, and made its last payment to Credit Solutions in the latter part of 2013. See Attachment A to the Answers of Airview Utilities, LLC to the Attorney General's data requests which reflects the amount of bad debt written off by Airview in 2015, 2014 and 2013.



**VERIFICATION**

I, Lawrence W. Smither, on behalf of Airview Utilities, LLC, have read the foregoing Supplemental Answers of Airview Utilities, LLC to the Attorney General's Second Request for Information and hereby state and affirm that the answers contained herein are true and correct to my knowledge and belief.

\_\_\_\_\_  
LAWRENCE W. SMITHER

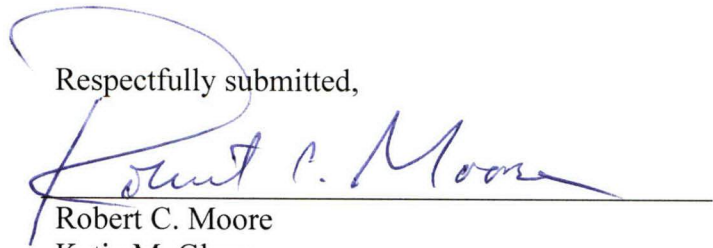
COMMONWEALTH OF KENTUCKY )  
  )  
COUNTY OF FRANKLIN      )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of October, 2016, by Lawrence W. Smither as Member of Airview Utilities, LLC, a Kentucky limited liability company, on behalf of said company.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

Respectfully submitted,




Robert C. Moore  
Katie M. Glass  
STITES & HARBISON PLLC  
421 West Main Street  
P.O. Box 634  
Frankfort, KY 40602-0634  
Telephone: (502) 223-3477  
Email: [rmoore@stites.com](mailto:rmoore@stites.com)  
Email: [kglass@stites.com](mailto:kglass@stites.com)  
COUNSEL FOR AIRVIEW UTILITIES, LLC

**CERTIFICATE OF SERVICE**

I hereby certify that a copy of the foregoing SUPPLEMENTAL ANSWERS TO THE ATTORNEY GENERAL'S SECOND REQUESTS FOR INFORMATION were served by electronic mail, on this 11<sup>th</sup> day of October, 2016 upon:

Angela M. Goad  
[angela.goad@ky.gov](mailto:angela.goad@ky.gov)  
S. Morgan Faulkner  
[Samantha.faulkner@ky.gov](mailto:Samantha.faulkner@ky.gov)  
Rebecca W. Goodman  
[Rebecca.goodman@ky.gov](mailto:Rebecca.goodman@ky.gov)  
Assistant Attorneys General  
1024 Capital Center Drive, Suite 200  
Frankfort, KY 40601-8204

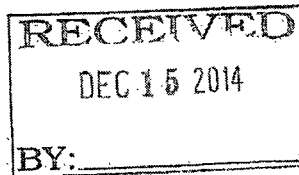


Robert C. Moore

# **ATTACHMENT C**

Hazelrigg & Cox, LLP  
 415 W. Main Street  
 P. O. Box 676  
 Frankfort, KY 40602

Invoice submitted to:  
 Marty Cogan  
 Airview Utilities, LLC  
 P. O. Box 91588  
 Louisville, KY 40291  
 RCM



December 09, 2014

Invoice # 26713

Professional Services

	<u>Hours</u>	<u>Amount</u>
11/20/2014 Review correspondence from L. Smither and reply to same	0.10	17.50
For professional services rendered	0.10	\$17.50
Previous balance		\$3,640.28
Balance due		<u>\$3,657.78</u>

*2014 AP*

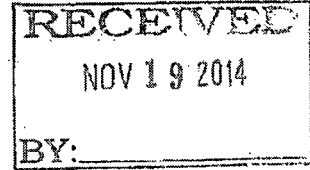
*RCM*

Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.10	175.00	\$17.50

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
 415 W. Main Street  
 P. O. Box 676  
 Frankfort, KY 40602



Invoice submitted to:  
 Marty Cogan  
 Airview Utilities, LLC  
 P. O. Box 91588  
 Louisville, KY 40291  
 RCM

November 07, 2014

Invoice # 26655

Professional Services

	<u>Hours</u>	<u>Amount</u>
10/15/2014 Review correspondence from L. Smither re NOV Telephone conference with L. Smither Telephone conference with D. D. Shaw Telephone conference with C. Bryant Telephone conference with C. Roth	0.90	157.50
10/17/2014 Review file Correspondence to C. Roth in response to NOV	0.50	87.50
For professional services rendered	<u>1.40</u>	<u>\$245.00</u>
Previous balance		\$3,395.28
Balance due		<u>\$3,640.28</u>

*RCM*

Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	1.40	175.00	\$245.00

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602

Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

October 03, 2014

	<u>Amount</u>
Previous balance	\$3,395.28
Balance due	<u>\$3,395.28</u>

*RCM*

WE ACCEPT VISA AND MASTERCARD

RECEIVED  
OCT 13 2014  
BY:

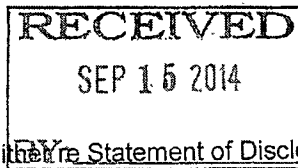
Hazelrigg & Cox, LLP  
 415 W. Main Street  
 P. O. Box 676  
 Frankfort, KY 40602

Invoice submitted to:  
 Marty Cogan  
 Airview Utilities, LLC  
 P. O. Box 91588  
 Louisville, KY 40291  
 RCM

September 10, 2014

Invoice # 26405

Professional Services



	<u>Hours</u>	<u>Amount</u>
8/22/2014 Review file Correspondence to M. Cogan and L. Smither re Statement of Disclosure and transfer of membership interests	0.20	35.00
8/26/2014 Telephone conference with M. Cogan Correspondence to L. Smither Review correspondence from M. Cogan	0.20	35.00
8/27/2014 Review correspondence from L. Smither Review and forward disclosure form to L. Smither	0.10	17.50
8/28/2014 Review correspondence from L. Smither and J. Kaninberg Draft Notice of Filing Correspondence to L. Smither and J. Kaninberg	0.30	52.50
For professional services rendered	0.80	\$140.00
Previous balance		\$3,255.28
Balance due		<u>\$3,395.28</u>

*RCM*

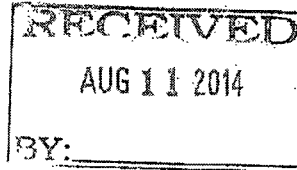
Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.80	175.00	\$140.00

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
 415 W. Main Street  
 P. O. Box 676  
 Frankfort, KY 40602

Invoice submitted to:  
 Marty Cogan  
 Airview Utilities, LLC  
 P. O. Box 91588  
 Louisville, KY 40291  
 RCM



August 08, 2014

Invoice # 26307

Professional Services

	<u>Hours</u>	<u>Amount</u>
7/7/2014 Review correspondence from L. Wood	0.05	8.75
7/30/2014 Review correspondence from L. Smither and Order Correspondence to L. Smither	0.20	35.00
	<hr/>	<hr/>
For professional services rendered	0.25	\$43.75
Previous balance		\$3,796.03
6/10/2014 Credit		(\$584.50)
Total payments and adjustments		<hr/> (\$584.50) <hr/>
Balance due		<hr/> \$3,255.28 <hr/>

*RCM*

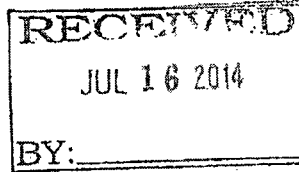
Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.25	175.00	\$43.75

WE ACCEPT VISA AND MASTERCARD



Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602



Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

July 08, 2014

Invoice # 26156

Professional Services

	<u>Hours</u>	<u>Amount</u>
6/9/2014 Review correspondence from L. Lackey Correspondence to L. Smither	0.15	26.25
For professional services rendered	0.15	\$26.25
Previous balance		\$3,769.78
Balance due		<u>\$3,796.03</u>

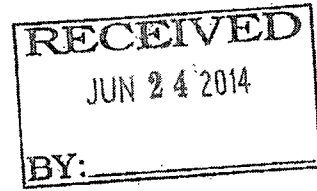
*RCM*

Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.15	175.00	\$26.25

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602



Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

June 09, 2014

Invoice # 26058

Professional Services

	<u>Hours</u>	<u>Amount</u>
5/14/2014 Review correspondence from L. Wood and respond to same re collections	0.10	17.50
5/20/2014 Review correspondence from L. Wood re collection letters for Airview Correspondence to delinquent customers	0.25	43.75
5/22/2014 Conference with L. Smither	0.15	26.25
5/23/2014 Telephone conference with D. Talley Review collection letters	0.40	70.00
	<u>0.90</u>	<u>\$157.50</u>
For professional services rendered		
Previous balance		\$3,612.28
		<u>\$3,769.78</u>
Balance due		

*RCM*

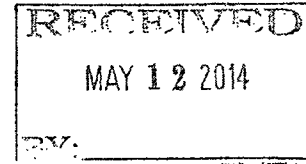
Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.90	175.00	\$157.50

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
 415 W. Main Street  
 P. O. Box 676  
 Frankfort, KY 40602

Invoice submitted to:  
 Marty Cogan  
 Airview Utilities, LLC  
 P. O. Box 91588  
 Louisville, KY 40291  
 RCM



May 05, 2014

Invoice # 25923

Professional Services

	<u>Hours</u>	<u>Amount</u>
4/16/2014 Telephone conference with L. Smither	0.20	35.00
For professional services rendered	<u>0.20</u>	<u>\$35.00</u>
Previous balance		\$3,777.28
4/9/2014 Payment - thank you. Check No. 2650		<u>(\$200.00)</u>
Total payments and adjustments		<u>(\$200.00)</u>
Balance due		<u><u>\$3,612.28</u></u>

*RCM*

Timekeeper Summary

<u>Name</u>	<u>Hours</u>	<u>Rate</u>	<u>Amount</u>
Robert C. Moore	0.20	175.00	\$35.00

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602

Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

April 10, 2014

	<u>Amount</u>
Previous balance	\$3,777.28
Balance due	<u>\$3,777.28</u>

*RCM*

WE ACCEPT VISA AND MASTERCARD

RECEIVED  
APR 14 2014  
BY: \_\_\_\_\_

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602

Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

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MAR 12 2014  
BY: \_\_\_\_\_

March 07, 2014

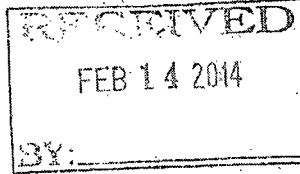
	<u>Amount</u>
Previous balance	\$3,977.28
1/22/2014 Payment - thank you. Check No. 2608	<u>(\$200.00)</u>
Total payments and adjustments	<u>(\$200.00)</u>
Balance due	<u>\$3,777.28</u>

*RCM*

WE ACCEPT VISA AND MASTERCARD

*Call # 2650 4-9-14*  
*\$200.00*

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602



Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

February 07, 2014

	<u>Amount</u>
Previous balance	\$3,977.28
1/22/2014 Payment - thank you. Check No. 2608	<u>(\$200.00)</u>
Total payments and adjustments	(\$200.00)
Balance due	<u><u>\$3,777.28</u></u>

*RCM*

WE ACCEPT VISA AND MASTERCARD

Hazelrigg & Cox, LLP  
415 W. Main Street  
P. O. Box 676  
Frankfort, KY 40602

Invoice submitted to:  
Marty Cogan  
Airview Utilities, LLC  
P. O. Box 91588  
Louisville, KY 40291  
RCM

January 09, 2014

	<u>Amount</u>
Previous balance	\$3,977.28
Balance due	<u>\$3,977.28</u>

*RCM*

WE ACCEPT VISA AND MASTERCARD

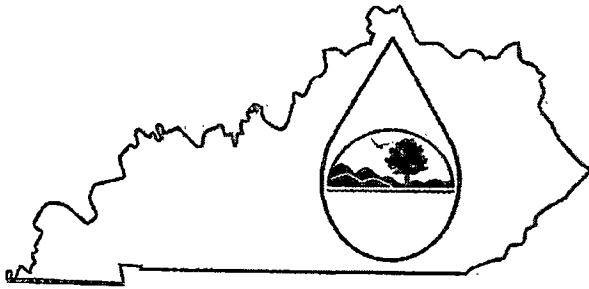
*Pay # 200.00*

RECEIVED  
JAN 13 2014  
BY: \_\_\_\_\_

# **ATTACHMENT I**



# KPDES FORM 1



## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

### PERMIT APPLICATION

This is an application to: (check one)

- Apply for a new permit.  
 Apply for reissuance of expiring permit.  
 Apply for a construction permit.  
 Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:

KPDES Branch (502) 564-3410

<b>I. FACILITY LOCATION AND CONTACT INFORMATION</b>		AGENCY USE							
A. Name of business, municipality, company, etc. requesting permit Airview Utilities, LLC									
B. Facility Name and Location					C. Facility Owner/Mailing Address				
Facility Location Name:					Owner Name:				
Airview Estates Subdivision WWTP					Airview Utilities LLC				
Facility Location Address (i.e. street, road, etc.):					Mailing Street:				
Highway 31W - North of Elizabethtown					P. O. Box 91588				
Facility Location City, State, Zip Code:					Mailing City, State, Zip Code:				
Elizabethtown, Kentucky 42701					Louisville, KY 40291				
					Telephone Number: 502-241-4809				

<b>II. FACILITY DESCRIPTION</b>		
A. Provide a brief description of activities, products, etc: This is the privately owned Wastewater Treatment Plant for Airview Estates Subdivision in Hardin County, Kentucky.		
B. Standard Industrial Classification (SIC) Code and Description		
Principal SIC Code & Description:	6552	
Other SIC Codes:		

<b>III. FACILITY LOCATION</b>	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Hardin County	City where facility is located (if applicable):
C. Body of water receiving discharge: Unnamed Tributary to Mill Creek Branch	
D. Facility Site Latitude (degrees, minutes, seconds): 37 45 34.2	Facility Site Longitude (degrees, minutes, seconds): 85 53 33.5
E. Method used to obtain latitude & longitude (see instructions):	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):	

<b>IV. OWNER/OPERATOR INFORMATION</b>	
A. Type of Ownership: <input type="checkbox"/> Publicly Owned <input checked="" type="checkbox"/> Privately Owned <input type="checkbox"/> State Owned <input type="checkbox"/> Both Public and Private Owned <input type="checkbox"/> Federally owned	
B. Operator Contact Information (See instructions)	
Name of Treatment Plant Operator: LAWRENCE W SMITHER	Telephone Number: 502-241-4809
Operator Mailing Address (Street): P. O. BOX 91588	
Operator Mailing Address (City, State, Zip Code): LOUISVILLE, KY 40291	
Is the operator also the owner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Certification Class: II	Certification Number: #13390

<b>V. EXISTING ENVIRONMENTAL PERMITS</b>		
Current NPDES Number: KY0045390	Issue Date of Current Permit: 12/08/2008	Expiration Date of Current Permit: 1/31/2014
Number of Times Permit Reissued:	Date of Original Permit Issuance:	Sludge Disposal Permit Number:
Kentucky DOW Operational Permit #:	Kentucky DSMRE Permit Number(s):	

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	NA	
Solid or Special Waste	NA	
Hazardous Waste - Registration or Permit	NA	

**VI. DISCHARGE MONITORING REPORTS (DMRs)**

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	Airview Utilities LLC
B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)	
DMR Mailing Name:	Microbac Laboratories, Inc.
DMR Mailing Street:	3323 Gilmore Industrial Blvd.
DMR Mailing City, State, Zip Code:	Louisville, KY 40213.
DMR Official Telephone Number:	502-962-6400

**VII. APPLICATION FILING FEE**

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

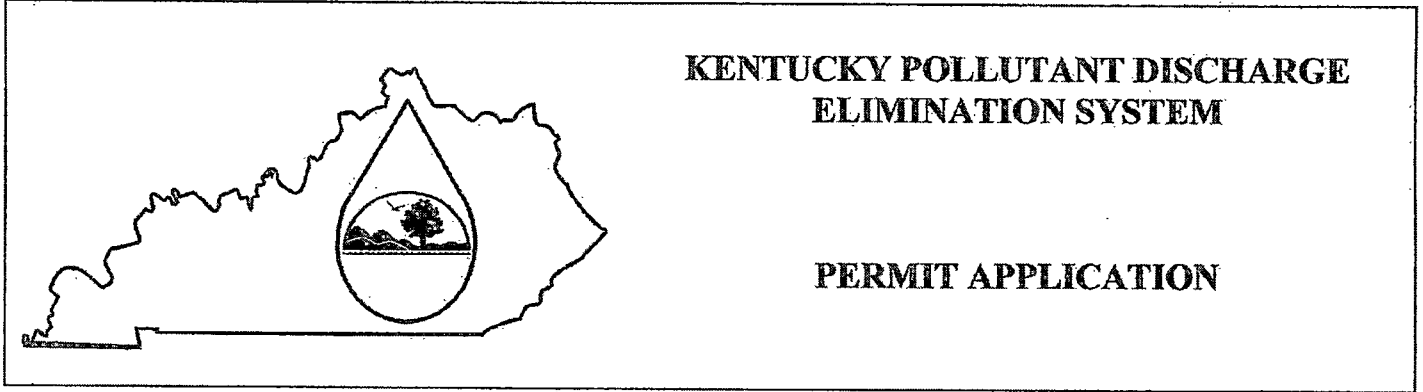
Facility Fee Category:	Filing Fee Enclosed:
Large Non-POTW	\$740.00

**VIII. CERTIFICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
LAWRENCE W SMITHER	502-241-4809
SIGNATURE	DATE:

# KPDES FORM SC



A complete application consists of this form and Form 1.  
 For additional information, contact: KPDES Branch, (502) 564-3410.

NAME OF FACILITY: AIRVIEW UTILITIES LLC	
I. FACILITY DISCHARGE FREQUENCY	AGENCY USE
A. Do discharge(s) occur all year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (Complete Item IX for intermittent discharges.)	
B. How many days per week?	7
II. A. Give the basis of design for sizing of the wastewater facility (see instructions): 198 single family residential units	
B. If new discharger, indicate anticipated discharge date:	
C. Indicate the design capacity of the treatment system:	.055 MGD

**III. Outfall Location (see instructions)**

Outfall (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
001	37	45	30	85	53	36	Tributary to Mill Creek Branch
Method used to obtain latitude/longitude (i.e. GPS unit, USGS topographic map coordinates, etc.)				GPS			

IV. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (see instructions)				
If wastewater other than domestic or sanitary is listed, complete page 4 in addition to page 1 and 2.				
OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes from Table SC-1
001	Sanitary Wastewater		Bar Screen	1-T
			Aeration	3-M
			Settling	1-U
			Lagoon	3-P
			Disinfection	2-F

V. Check the type(s) of wastewater discharged.

- Domestic (60% or more sanitary sewage)       Oil field waste  
 Noncontact cooling water       Other (list):

VI. Does all water used at facility (except for human consumption) flow to a treatment plant?  Yes  No

VII. Discharge to other than surface waters. Check appropriate location:

- Publicly-owned lake or impoundment      Name of lake:  
 Publicly-owned treatment works (POTW).      Name of POTW:  
 Land application of Effluent  
 Surface injection (Check term and identify on map)  lateral field;  sinkhole;  sinking stream;  deep well  
 Closed Circuit (Check appropriate term)  Holding tank;  Mechanical evaporation;  Waste impoundment

VIII. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).

<input type="checkbox"/>	Antimony		<input type="checkbox"/>	Copper		<input type="checkbox"/>	Silver	
<input type="checkbox"/>	Arsenic		<input type="checkbox"/>	Lead		<input type="checkbox"/>	Thallium	
<input type="checkbox"/>	Beryllium		<input type="checkbox"/>	Mercury		<input type="checkbox"/>	Zinc	
<input type="checkbox"/>	Cadmium		<input type="checkbox"/>	Nickel		<input type="checkbox"/>		
<input type="checkbox"/>	Chromium		<input type="checkbox"/>	Selenium		<input type="checkbox"/>		

<b>IX. INTERMITTENT DISCHARGES (Complete this section for intermittent discharges.)</b>		
A. Number of bypass points:	NA	(If bypass points are indicated, information below must be completed for each bypass.)

Check when bypass occurs:	<input type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of bypass incidents	per year	per year
Give average duration of bypass	hours	hours
Give average volume per incident	1,000 gallons	1,000 gallons
Give reason why bypass occurs:		

<b>B: Number of Overflow Points: NA (If discharge is from an overflow point, the information below must be completed.)</b>		
Check when overflow occurs:	<input type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of overflow incidents:	per year	per year
Give average duration of overflow:	hours	hours
Give average volume per incident:	1,000 gallons	1,000 gallons

C. Number of seasonal discharge points	NA
Give the number of times discharge occurs per year	
Give the average volume per discharge occurrence	(1,000 gallons)
Give the average duration of each discharge	(days)
List month(s) when the discharge occurs	

<b>X. AREA SERVED (see instructions)</b>	
<b>NAME</b>	<b>ACTUAL POPULATION SERVED</b>
Airview Estates Subdivision, Hardin County, KY	198 Residential Units
<b>TOTAL POPULATION SERVED</b>	

(PLEASE COMPLETE THIS PAGE IF OTHER THAN DOMESTIC WASTEWATER IS DISCHARGED)

<b>XI. COOLING WATER ADDITIVES AND THEIR COMPOSITIONS</b>		
<b>Additive</b>	<b>Composition</b>	<b>Concentration (mg/l)</b>
NA	NA	NA

<b>XII. EFFLUENT CHARACTERISTICS</b>			
A. Indicate results of analysis for pollutants listed below.			
<b>POLLUTANT/PARAMETER</b>	<b>MAX DAILY VALUE</b>	<b>AVG DAILY VALUE</b>	<b>NUMBER OF SAMPLES</b>
BOD <sub>5</sub>	≤ 5	≤ 5	1
TOTAL SUSPENDED SOLIDS	≤ 5	≤ 5	1
FECAL COLIFORM	1	1	1
TOTAL RESIDUAL CHLORINE	.25	.25	1
OIL AND GREASE	≤ 5	≤ 5	1
CHEMICAL OXYGEN DEMAND	Waiver requested		
TOTAL ORGANIC CARBON	Waiver requested		
AMMONIA	.32	.32	1
DISCHARGE FLOW	.027	.027	1
PH	6.28	6.28	1
TEMPERATURE (WINTER)	Waiver requested		
TEMPERATURE (SUMMER)	Waiver requested		

B. Frequency and duration of flow:	Continuous
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**XIII. CERTIFICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
LAWRENCE W SMITHER	502-241-4809
SIGNATURE	DATE

IV. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (see instructions)				
If wastewater other than domestic or sanitary is listed, complete page 4 in addition to page 1 and 2.				
OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes from Table SC-1
001	Sanitary Wastewater		Bar Screen	1-T
			Aeration	3-M
			Settling	1-U
			Lagoon	3-P
			Disinfection	2-F

V. Check the type(s) of wastewater discharged.

- Domestic (60% or more sanitary sewage)       Oil field waste  
 Noncontact cooling water       Other (list):

VI. Does all water used at facility (except for human consumption) flow to a treatment plant?  Yes  No *NA*

VII. Discharge to other than surface waters. Check appropriate location: *NA*

- Publicly-owned lake or impoundment      Name of lake:  
 Publicly-owned treatment works (POTW).      Name of POTW:  
 Land application of Effluent  
 Surface injection (Check term and identify on map)  lateral field;  sinkhole;  sinking stream;  deep well  
 Closed Circuit (Check appropriate term)  Holding tank;  Mechanical evaporation;  Waste impoundment

VIII. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).

*NA*

<input type="checkbox"/>	Antimony		<input type="checkbox"/>	Copper		<input type="checkbox"/>	Silver	
<input type="checkbox"/>	Arsenic		<input type="checkbox"/>	Lead		<input type="checkbox"/>	Thallium	
<input type="checkbox"/>	Beryllium		<input type="checkbox"/>	Mercury		<input type="checkbox"/>	Zinc	
<input type="checkbox"/>	Cadmium		<input type="checkbox"/>	Nickel		<input type="checkbox"/>		
<input type="checkbox"/>	Chromium		<input type="checkbox"/>	Selenium		<input type="checkbox"/>		



(PLEASE COMPLETE THIS PAGE IF OTHER THAN DOMESTIC WASTEWATER IS DISCHARGED)

XI. COOLING WATER ADDITIVES AND THEIR COMPOSITIONS <span style="float: right;">NA</span>		
Additive	Composition	Concentration (mg/l)

XII. EFFLUENT CHARACTERISTICS			
A. Indicate results of analysis for pollutants listed below.			
POLLUTANT/PARAMETER	MAX DAILY VALUE	AVG DAILY VALUE	NUMBER OF SAMPLES
BOD <sub>5</sub>	25	25	1
TOTAL SUSPENDED SOLIDS	25	25	1
FECAL COLIFORM <i>E-coli</i>	1	1	1
TOTAL RESIDUAL CHLORINE	.25	.25	1
OIL AND GREASE	25	25	1
CHEMICAL OXYGEN DEMAND	WAIVER REQUESTED		
TOTAL ORGANIC CARBON	" "		
AMMONIA	.32	.32	1
DISCHARGE FLOW	.027	.027	1
PH	6.28	6.28	1
TEMPERATURE (WINTER)	WAIVER REQUESTED		
TEMPERATURE (SUMMER)	" "		

B. Frequency and duration of flow: Continuous

**XIII. CERTIFICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): LAWRENCE W SMITHER	TELEPHONE NUMBER (area code and number): 502-241-4809
SIGNATURE	DATE